

EXHIBIT F

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CHIROPRACTIC FOLLOW-UP

DATE: September 14, 2007

Patient's Name: Lee, Dionne

Date of Examination: September 14, 2007

Date of Accident: May 9, 2007

History of Condition:

Ms. Dionne Lee presents for follow-up evaluation. Overall there has been only mild improvement. Ms. Lee has recently undergone a series of epidural steroid injections which have been effective.

Chief Complaints:

1. Neck pain which radiating into her left shoulder.
2. Lower back pain.

Ms. Lee states she remains stiff and her activities frequently increase her pain. She continues to limit them.

Again I have reviewed the MRI findings with the patient. A cervical spine MRI dated May 23, 2007 reveals C2-3, C4-5 and C5-6 disc herniations with impingement of the thecal sac and encroachment of the IVF's. A lumbosacral spine MRI dated June 11, 2007 reveals L4-5 and L5-S1 disc bulges.

Physical Examination Findings:

There is tenderness to palpation of the spinal joints in the cervical spine. End ranges of cervical motion enhances her pain. Motion palpation reveals restricted motor units. There is muscle spasm and trigger points in the supraspinatus muscles. The Cervical Compression Test is positive. The Jacksons Compression Test is positive on the left.

Passive cervical spine ranges of motion reveal:

	<u>Patient's Average Range of Motion</u>	<u>Normal Average Range of Motion</u>
Flexion	45	60
Extension	30	50
Lt. Rotation	55	80
Rt. Rotation	60	80
Lt. Lat Flexion	25	45
Rt. Lat Flexion	25	45

Palpation of the lumbar spine reveals tenderness of the joints and spasm of the paraspinal muscles, including the erector spinae and quadratus lumborum muscles. The Kemp's Test is positive on the right. The Straight Leg Raise Test is positive on the right at 60 degrees.

Passive lumbar ranges of motion studies reveal:

	<u>Patient's Average Range of Motion</u>	<u>Normal Average Range of Motion</u>
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Flexion	70	90
Extension	15	30
Lt. Lat Flexion	20	30
Rt. Lat Flexion	20	30

Clinical Impression:

- 1) Derangement of the cervical spine with C2-3, C4-5 and C5-6 disc herniations.
- 2) Derangement of the lumbar spine with L4-5 and L5-S1 disc bulges.
- 3) Chronic myalgia and myofasciitis.

Treatment and Recommendations:

Ms. Lee continues to be symptomatic. Her clinical complaints are consistent with her physical examination findings. She is unable to perform her routine social and personal activities including work. She continues to demonstrate significant restrictions of motion. She remains totally disabled. The patient has an appointment with the neurosurgeon, Dr. Ramesh Babu next week. Surgery will be discussed. In the meantime, care will continue.

Sincerely,

Mitchell M. Zeren, D.C.